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| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | ☐ Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ■ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | t 1: Identify Yourself | | |
|-----|--|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Eucia First name B Middle name Cunningham Last name and Suffix (Sr., Jr., II, III) | First name Middle name Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | Belinda Cunningham | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-8948 | |

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Debtor 1 Lucia B Cunningham

ham Case number (if known)

| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
|----|---|---|---|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. | | ☐ I have not used any business name or EINs. |
| | Include trade names and doing business as names | Business name(s) | · | Business name(s) |
| | | EINs | - | EINs |
| 5. | Where you live | | | If Debtor 2 lives at a different address: |
| | | 588 Escanaba Ave Calumet City, IL 60409 | | |
| | | Number, Street, City, State & ZIP Code | - | Number, Street, City, State & ZIP Code |
| | | Cook | | |
| | | County | | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | - | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for | Check one: | | Check one: |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | - | |

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Case number (if known) Debtor 1 Lucia B Cunningham

| , | The chapter of the | Charl | cono (Eoro L | riof docorintian | of each see Notice Beautiful his | 11 LL C C & 2/12/h) for Individuals Eiling for Do | nkruntov | | |
|------------|--|--------------------------|----------------------------------|--------------------------------------|---|--|----------------|--|--|
| | Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropriate | 11 U.S.C. § 342(b) for Individuals Filing for Bar e box. | пкгиртсу | | |
| | choosing to file under | ☐ Chapter 7 ☐ Chapter 11 | | | | | | | |
| | | | | | | | | | |
| | | ☐ Chapter 12 | | | | | | | |
| | | ■ Ch | napter 13 | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is sub | pically, if you are paying the fee yo | k with the clerk's office in your local court for mourself, you may pay with cash, cashier's checkalf, your attorney may pay with a credit card or | k, or money | | |
| | | | | | tallments. If you choose this options (Official Form 103A). | on, sign and attach the Application for Individua | als to Pay | | |
| | | | but is not req applies to you | uired to, waive ur family size ar | your fee, and may do so only if your fee, and may do so only if you are unable to pay the fee i | n only if you are filing for Chapter 7. By law, a jur income is less than 150% of the official power installments). If you choose this option, you n | erty line that | | |
| | | | the Application | on to Have the (| Chapter 7 Filing Fee Waived (Offi | cial Form 103B) and file it with your petition. | | | |
|) . | Have you filed for bankruptcy within the | ■ No | | | | | | | |
| | last 8 years? | ☐ Ye | S. | | | | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| | | | District | | When | Case number | | | |
| 10. | Are any bankruptcy | ■ No | | | | | | | |
| | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Ye | S. | | | | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| | | | Debtor | | | Relationship to you | | | |
| | | | District | | When | Case number, if known | | | |
| 11. | Do you rent your residence? | ■ No | Go to I | ine 12. | | | | | |
| | | ☐ Ye | s. Has yo | our landlord obta | ained an eviction judgment agains | t you and do you want to stay in your residenc | e? | | |
| | | | | No. Go to line | 12. | | | | |
| | | | | Yes. Fill out In | | Judgment Against You (Form 101A) and file it | with this | | |

Debtor 1 Lucia B Cunningham

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Case number (if known)

| Part | Report About Any Bu | sinesses | You Own | as a Sole Proprietor | | | | |
|------|--|--------------|----------|--|------------------|--|--|--|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | | | | |
| | | ☐ Yes. | Name | and location of business | | | | |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | | | | |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | Number, Street, City, State & ZIP Code | | | | |
| | it to this petition. | | Check | the appropriate box to describe your business: | | | | |
| | | | | Health Care Business (as defined in 11 U.S.C. § 101(27A)) | | | | |
| | | | | Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) | | | | |
| | | | | Stockbroker (as defined in 11 U.S.C. § 101(53A)) | | | | |
| | | | | Commodity Broker (as defined in 11 U.S.C. § 101(6)) | | | | |
| | | | | None of the above | | | | |
| 13. | 3. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor so that it deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, fin 11 U.S.C. 1116(1)(B). | | | | et, statement of | | | |
| | For a definition of small | No. | I am r | ot filing under Chapter 11. | | | | |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | | I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. | | | | |
| | | ☐ Yes. | I am f | ing under Chapter 11 and I am a small business debtor according to the definition in the B | ankruptcy Code. | | | |
| Part | 4: Report if You Own or | Have Anv | Hazardo | us Property or Any Property That Needs Immediate Attention | | | | |
| | Do you own or have any | | | | | | | |
| 14. | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is | ne hazard? | | | | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | ate attention is why is it needed? | | | | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | the property? Number, Street, City, State & Zip Code | | | | |
| | | | | | | | | |

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Debtor 1 Lucia B Cunningham

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Lucia B Cunningham

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Case number (if known)

| Par | 6: Answer These Questi | ions for Re | eporting Purposes | | | | | |
|-----|--|-----------------------|--|---|---|--|--|--|
| 16. | What kind of debts do you have? | 16a. | | sumer debts? Consumer debts are definately, or household purpose." | ned in 11 U.S.C. § 101(8) as "incurred by an | | | |
| | | | ☐ No. Go to line 16b. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16b. | | iness debts? Business debts are debts ment or through the operation of the busi | | | | |
| | | | □ No. Go to line 16c. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you ow | e that are not consumer debts or busines | s debts | | | |
| 17. | Are you filing under Chapter 7? | ■ No. | I am not filing under Chapter 7 | . Go to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ☐ Yes. | | you estimate that after any exempt proplable to distribute to unsecured creditors? | erty is excluded and administrative expenses | | | |
| | administrative expenses are paid that funds will | | □ No | | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do | 1 -49 | | □ 1,000-5,000 | □ 25,001-50,000 | | | |
| | you estimate that you owe? | □ 50-99 | | 5001-10,000 | □ 50,001-100,000 | | | |
| | | ☐ 100-19 ☐ 200-99 | | ☐ 10,001-25,000 | ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to be worth? | | 50,000 01 - \$100,000 001 - \$500,000 | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion | | | |
| | | □ \$500,0 | 001 - \$1 million | ☐ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your liabilities to be? | \$100,0 | 50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| Par | t 7: Sign Below | | | | | | | |
| For | you | I have ex | amined this petition, and I decla | re under penalty of perjury that the inforn | nation provided is true and correct. | | | |
| | | | | am aware that I may proceed, if eligible, ief available under each chapter, and I ch | | | | |
| | | | | t pay or agree to pay someone who is no notice required by 11 U.S.C. § 342(b). | t an attorney to help me fill out this | | | |
| | | I request | relief in accordance with the cha | apter of title 11, United States Code, spec | cified in this petition. | | | |
| | | bankrupto and 3571 | cy case can result in fines up to | oncealing property, or obtaining money o \$250,000, or imprisonment for up to 20 y | or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | | | B Cunningham Cunningham | Signature of Debto | 72 | | | |
| | | | of Debtor 1 | Oignature of Debitor | · - | | | |
| | | Executed | on <u>January 24, 2017</u> MM / DD / YYYY | Executed on MM | / DD / YYYY | | | |

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Debtor 1 Lucia B Cunningham Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| | e M. Greenberg | Date | January 24, 2017 |
|-----------------|------------------------|---------------|-----------------------------|
| Signature of | Attorney for Debtor | | MM / DD / YYYY |
| Lorraine N | /I. Greenberg | | |
| Lorraine N | /I. Greenberg | | |
| Firm name | chigan Avenue | | |
| Suite 800 | ingan Avenue | | |
| Chicago, I | L 60601 | | |
| Number, Street, | City, State & ZIP Code | | |
| Contact phone | 312-588-3330 | Email address | Igreenberg@greenberglaw.net |
| 3129023 | | | |
| Bar number & S | tate | | |

| | | DOCHM | eni Pade 8 di | /3 | - |
|---------------------|--------------------------|-------------------|---------------|----|-----------------------|
| Fill in this infor | mation to identify your | case: | | | |
| Debtor 1 | Lucia B Cunningl | ham | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Pa | t 1: Summarize Your Assets | | |
|----|--|------------------------|---------------------------|
| | | Your a | assets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 7,118.31 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 7,118.31 |
| Pa | t 2: Summarize Your Liabilities | | |
| | | | iabilities nt you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 30,000.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 143,138.62 |
| | Your total liabilities | \$ | 173,138.62 |
| Pa | t 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 3,269.50 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 2,263.98 |
| Pa | t 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ır other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a | a persona ^l | , family, or |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1 Lucia B Cunningham

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Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____5,493.45

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Tota | l claim |
|--|------|------------|
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 30,000.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 88,340.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 118,340.00 |

Document Page 10 of 73 Fill in this information to identify your case and this filing: Debtor 1 Lucia B Cunningham Middle Name Last Name First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? Part 2: Describe Your Vehicles Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No Yes Do not deduct secured claims or exemptions. Put Hyundai 3.1 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Santa Fe Creditors Who Have Claims Secured by Property. Debtor 1 only Model: 2004 Debtor 2 only Current value of the Current value of the 200.000 Approximate mileage: entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$2,400.00 \$2,400.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$2,400,00 pages you have attached for Part 2. Write that number here.......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Lucia B Cun | ningham | Document | Page 11 of 73 Case nun | nber (if known) |) |
|--------------------------------|--|---|--|--|-----------------|----------------------------------|
| ■ Yes | . Describe | g | | | , , | |
| | | housewares, s microwave, be | mall appliances, pots, ds, tables, chairs, dres room set, nightstands, | oliday decorations; linens, pans, dishes; washer, drye sers, chests, lamps, curio tv stand, dining set, books | | \$2,500.00 |
| □ No | oles: Televisions ar | | deo, stereo, and digital equi media players, games | pment; computers, printers, scar | nners; music | collections; electronic devices |
| | | tvs, cell phone | , laptop, tablet, dvd pla | yer, | | \$700.00 |
| Examp ■ No | | figurines; paintings ons, memorabilia, c | | oks, pictures, or other art object | s; stamp, coir | n, or baseball card collections; |
| Examp | nent for sports ar bles: Sports, photo musical instru | graphic, exercise, a | and other hobby equipment; | bicycles, pool tables, golf clubs, | skis; canoes | and kayaks; carpentry tools; |
| ■ No | | s, shotguns, ammur | iition, and related equipmer | ıt | | |
| □ No | | othes, furs, leather o | coats, designer wear, shoes | s, accessories | | |
| | | necessary wea | ring apparel, bible, tex | books, family pictures | | \$1,000.00 |
| □ No | | welry, costume jewe | elry, engagement rings, wed | lding rings, heirloom jewelry, wa | tches, gems, | |
| | | costume jewel | ry | | | \$200.00 |
| Exam No □ Yes 14. Any o ■ No | arm animals oples: Dogs, cats, b Describe ther personal and Give specific info | d household items | s you did not already list, i | ncluding any health aids you | did not list | |
| | | | es from Part 3, including a | ny entries for pages you have | attached | \$4,400.00 |

Official Form 106A/B Schedule A/B: Property page 2

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Case number (if known) Document Debtor 1 Lucia B Cunningham

| Pa | rt 4: Describe Your Financial Assets | | |
|-----|---|--|---|
| Do | you own or have any legal or equitable interest in any | of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| | Cash Examples: Money you have in your wallet, in your home, No Yes | | ır petition |
| | Deposits of money Examples: Checking, savings, or other financial accounts institutions. If you have multiple accounts with | | erage houses, and other similar |
| | ■ No □ Yes | Institution name: | |
| | Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokers No Institution or issuer name | , | |
| | Yes Institution or issuer name | . | |
| | Non-publicly traded stock and interests in incorporate joint venture No | ed and unincorporated businesses, including an i | nterest in an LLC, partnership, and |
| | ☐ Yes. Give specific information about them Name of entity: | % of ownership | : |
| | Government and corporate bonds and other negotiab Negotiable instruments include personal checks, cashiers Non-negotiable instruments are those you cannot transfe No Yes. Give specific information about them Issuer name: | s' checks, promissory notes, and money orders. | |
| | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b No |), thrift savings accounts, or other pension or profit-s | haring plans |
| | Yes. List each account separately. Type of account: | Institution name: | |
| | deferred compensation | deferred compensation plan (not property the estate) | y of \$0.00 |
| | Pension | State of Illinois employees pension plan | \$0.00 |
| | Security deposits and prepayments Your share of all unused deposits you have made so that Examples: Agreements with landlords, prepaid rent, publications. | | companies, or others |
| | ■ No □ Yes | Institution name or individual: | |
| 23. | Annuities (A contract for a periodic payment of money to ■ No | you, either for life or for a number of years) | |
| | ■ No □ Yes Issuer name and description. | | |
| | Interests in an education IRA, in an account in a qualif 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). | ied ABLE program, or under a qualified state tuiti | on program. |
| | ■ No □ Yes Institution name and description. Se | parately file the records of any interests.11 U.S.C. § | 521(c): |

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

| | Case 17-020. | 32 DUC 1 | Pooumont | | Desc Main |
|-----------------------------------|--|--------------------------------------|---------------------------|--|---|
| Debtor 1 | Lucia B Cunning | ham | Document | Page 13 of 73 Case number (if known) | |
| ☐ Yes | . Give specific informat | tion about them | | | |
| | nts, copyrights, tradem | | | ual property and licensing agreements | |
| ■ No □ Yes | . Give specific informat | tion about them | | | |
| Exan | ses, franchises, and o | | | n holdings, liquor licenses, professional license | es |
| ■ No □ Yes | . Give specific informat | tion about them | | | |
| Money o | r property owed to you | u? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. Tax re | efunds owed to you | | | | |
| ■ No □ Yes | . Give specific informati | ion about them, inc | luding whether you alre | eady filed the returns and the tax years | |
| ■ No | | , , | isal support, child supp | ort, maintenance, divorce settlement, property | settlement |
| | | | | | |
| Exan | | sability insurance poans you made to | | nefits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | | | | | |
| | ests in insurance policingles: Health, disability, | | ealth savings account (| (HSA); credit, homeowner's, or renter's insuran | ice |
| ■ Yes | . Name the insurance c | ompany of each po Company name: | olicy and list its value. | Beneficiary: | Surrender or refund value: |
| | - | term life insura | nce policy | Tynesha Cunningham and Clarence Cunningham III | \$0.00 |
| | _ | whole life insur | ance policy | Tynesha Cunningham and Clarence Cunningham III | \$318.31 |
| If you some ■ No □ Yes 33. Claim | one has died. Give specific informat as against third parties | a living trust, expection | t proceeds from a life ir | nsurance policy, or are currently entitled to rece | eive property because |
| Exan | oples: Accidents, employ | yment disputes, ins | surance claims, or right | s to sue | |
| ■ No □ Yes | | | | | |
| ☐ Yes | . Describe each claim | | every nature includin | ng counterclaims of the debtor and rights to | set off claims |

Official Form 106A/B Schedule A/B: Property page 4

| Debtor | Case 17-02032 Doc 1 Lucia B Cunningham | Filed 01/24/17 Document | Entered 0 Page 14 of | 1/24/17 13:02:48 73 Case number (if known) | Desc Main |
|-----------------|--|----------------------------|-------------------------|--|------------------------|
| ПУ | es. Describe each claim | | | | |
| | | | | | |
| 35. An | y financial assets you did not already list | | | | |
| | es. Give specific information | | | | |
| | dd the dollar value of all of your entries fror Part 4. Write that number here | | | | \$318.31 |
| Part 5: | Describe Any Business-Related Property You | Own or Have an Interest I | n. List any real esta | ate in Part 1. | |
| 37. Do y | you own or have any legal or equitable interest | in any business-related p | roperty? | | |
| ■ No | o. Go to Part 6. | | | | |
| □ Ye | es. Go to line 38. | | | | |
| Part 6: | Describe Any Farm- and Commercial Fishing- If you own or have an interest in farmland, list it ir | | n or Have an Interes | st In. | |
| 46. Do | you own or have any legal or equitable in | nterest in any farm- or o | commercial fishir | ng-related property? | |
| | No. Go to Part 7. | | | | |
| | Yes. Go to line 47. | | | | |
| | Describe All Property You Own or Have a | did not already list? | Not List Above | | |
| | camples: Season tickets, country club member | ership | | | |
| ■ N | No 'es. Give specific information | | | | |
| | es. Give specific information | | | ŗ | 1 |
| 54. A | dd the dollar value of all of your entries fr | om Part 7. Write that n | umber here | | \$0.00 |
| Part 8: | List the Totals of Each Part of this Form | | | | |
| 55. P | art 1: Total real estate, line 2 | | | | \$0.00 |
| 56. P | art 2: Total vehicles, line 5 | | \$2,400.00 | | |
| 57. P | art 3: Total personal and household items | s, line 15 | \$4,400.00 | | |
| 58. P | art 4: Total financial assets, line 36 | | \$318.31 | | |
| | art 5: Total business-related property, line | | \$0.00 | | |
| | art 6: Total farm- and fishing-related prop | | \$0.00 | | |
| 61. P | art 7: Total other property not listed, line | 54 + | \$0.00 | | |
| 62. T | otal personal property. Add lines 56 throug | h 61 | \$7,118.31 | Copy personal property to | otal \$7,118.31 |
| 63. T | otal of all property on Schedule A/B. Add | line 55 + line 62 | | | \$7,118.31 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this infor | rmation to identify your | case: | | |
|------------------------|--------------------------|-------------------|-------------|------------------------------|
| Debtor 1 | Lucia B Cunningl | ham | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this amended fili |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | rt 1: Identify the Property You Claim as E | xempt | | | | | |
|----|---|--------------------------------------|--------|---|------------------------------------|--|--|
| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | |
| | ■ You are claiming state and federal nonbank | kruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | |
| | ☐ You are claiming federal exemptions. 11 t | J.S.C. § 522(b)(2) | | | | | |
| 2. | For any property you list on Schedule A/B | that you claim as exe | empt, | fill in the information below. | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | | |
| | , | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | | |
| | 2004 Hyundai Santa Fe 200,000 miles | \$2,400.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | | |
| | Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | household goods and furnishings, | \$2,500.00 | | \$2,500.00 | 735 ILCS 5/12-1001(b) | | |
| | holiday decorations; linens, housewares, small appliances, pots, pans, dishes; washer, dryer, microwave, beds, tables, chairs, dressers, chests, lamps, curio cabinet, living room set, nightstands, tv stand, dining set, book Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |
| | tvs, cell phone, laptop, tablet, dvd player, | \$700.00 | | \$700.00 | 735 ILCS 5/12-1001(b) | | |
| | Line from Schedule A/B: 7.1 | | | 100% of fair market value, up to any applicable statutory limit | | | |

\$1,000.00

necessary wearing apparel, bible,

texbooks, family pictures Line from Schedule A/B: 11.1 735 ILCS 5/12-1001(a)

\$1,000.00

100% of fair market value, up to any applicable statutory limit

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Lucia B Cunningham Case number (if known)

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption |
|--|--------------------------------------|-----------------------------------|---|---------------------------------------|
| | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | |
| costume jewelry Line from Schedule A/B: 12.1 | \$200.00 | | \$200.00 | 735 ILCS 5/12-1001(b) |
| Line nom Schedule A/B. 12.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Pension: State of Illinois employees pension plan | \$0.00 | | 100% | 40 ILCS 5/8-244, 5/9-228, 5/14-147 |
| Line from Schedule A/B: 21.2 | | | 100% of fair market value, up to any applicable statutory limit | 0,14 141 |
| whole life insurance policy Beneficiary: Tynesha Cunningham | \$318.31 | | \$318.31 | 735 ILCS 5/12-1001(b) |
| and Clarence Cunningham III Line from Schedule A/B: 31.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| Are you claiming a homestead exemption | | | lad on ar after the date of adjustmen | nt) |
| (Subject to adjustment on 4/01/19 and every | 3 years after that for ca | ases II | led on or after the date of adjustifier | н.) |

Yes

| Fill in this information to identify your case: | | | | | | | |
|---|--------------------------|-------------------|-------------|---------|----------|--|--|
| Debtor 1 | Lucia B Cunning | ham | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | |
| Case number | | | | | | | |
| (if known) | | | | ☐ Check | if this | | |
| | | | | amend | ed filir | | |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

| | | 200 17 02002 1000 | Document Document | Pag | e 18 of 7 | 73 | .40 D | 000 11 | iani |
|----------------------|--|--|--|-------------------------|-------------------------------|---|----------------------------|---------------|----------------------------------|
| Fill | in this infor | mation to identify your case: | | | | | | | |
| Del | btor 1 | Lucia B Cunningham | | | | | | | |
| | | First Name | Middle Name | Last Na | me | | | | |
| Del | btor 2 | | | | | | | | |
| (Spo | ouse if, filing) | First Name | Middle Name | Last Na | me | | | | |
| Uni | ited States Ba | ankruptcy Court for the: NO | RTHERN DISTRICT OF ILL | INOIS | | | | | |
| Ca | se number | | | | | | | | |
| | nown) | | | | | | | | if this is an led filing |
| Off | ficial Fori | m 106E/F | | | | | | | |
| | | E/F: Creditors Who | | | | | | | 12/15 |
| Scho Scho eft. | edule G: Éxec edule D: Credi Attach the Co | ntracts or unexpired leases that c utory Contracts and Unexpired L tors Who Have Claims Secured b ntinuation Page to this page. If your mber (if known). | eases (Official Form 106G). Do by Property. If more space is n | o not inc eeded, c | lude any cre copy the Part | ditors with partially s you need, fill it out, | secured clai number the | ms that a | are listed in n the boxes on the |
| Pai | rt 1: List A | All of Your PRIORITY Unsecu | red Claims | | | | | | |
| 1. | Do any credit | ors have priority unsecured clair | ns against you? | | | | | | |
| | ☐ No. Go to | Part 2. | | | | | | | |
| | Yes. | | | | | | | | |
| 2. | identify what to possible, list the | Ir priority unsecured claims. If a or type of claim it is. If a claim has both the claims in alphabetical order accoret than one creditor holds a particula | priority and nonpriority amounts ording to the creditor's name. If y | s, list that ou have | t claim here a | nd show both priority a | and nonpriori | ty amoun | ts. As much as |
| | (For an explar | nation of each type of claim, see the | instructions for this form in the | instructio | on booklet.) | Total claim | Priority | | Nonpriority |
| 2.1 | Illinois | Department of Revenue | Last 4 digits of accoun | ıt numba | NP. | \$0.00 | amount | \$0.00 | amount \$0.00 |
| 2.1 | | reditor's Name | Last 4 digits of account | it numbe | #I | | | \$0.00 | \$0.00 |
| | | x 64338 po, IL 60664-0338 | When was the debt inc | urred? | 2016-20 | 009 | = | | |
| | | Street City State Zlp Code | As of the date you file, | the clair | m is: Check a | II that apply | | | |
| | Who incurre | ed the debt? Check one. | ☐ Contingent | | | | | | |
| | Debtor 1 | only | ☐ Unliquidated | | | | | | |
| | Debtor 2 | only | ☐ Disputed | | | | | | |
| | Debtor 1 | and Debtor 2 only | Type of PRIORITY unse | ecured c | :laim: | | | | |
| | ☐ At least o | ne of the debtors and another | ☐ Domestic support ob | ligations | | | | | |
| | ☐ Check if | this claim is for a community de | ebt Taxes and certain ot | her debts | s you owe the | government | | | |
| | | subject to offset? | ☐ Claims for death or p | | | | | | |
| | ■ No | | Other. Specify | | | | | | _ |
| | ☐ Yes | | · · — | | | | | | • |

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| Debt | or 1 Lucia B Cunningham | | Case num | ber (if know) | | |
|------------------------|---|--|-------------------|--------------------------|---------------------------|-------------|
| 2.2 | Internal Revenue Service Priority Creditor's Name | Last 4 digits of account number | | \$30,000.00 | \$30,000.00 | \$0.00 |
| | Central Insolvency Unit P.O. Box 7346 Philadelphia, PA 19101-7346 | When was the debt incurred? | 2016-2009 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all tha | it apply | | |
| | Who incurred the debt? Check one. | ☐ Contingent | | | | |
| | Debtor 1 only | ☐ Unliquidated | | | | |
| | ☐ Debtor 2 only | ☐ Disputed | | | | |
| | ☐ Debtor 1 and Debtor 2 only | Type of PRIORITY unsecured cla | im: | | | |
| | ☐ At least one of the debtors and another | ☐ Domestic support obligations | | | | |
| | ☐ Check if this claim is for a community debt | Taxes and certain other debts y | ou owe the gove | ernment | | |
| | Is the claim subject to offset? | ☐ Claims for death or personal inju | ury while you we | ere intoxicated | | |
| | ■ No □ Yes | Other. Specify | | | | |
| Part | 2: List All of Your NONPRIORITY Unsecu | urad Claima | | | | |
| 4. L u tł | Yes. ist all of your nonpriority unsecured claims in the nsecured claim, list the creditor separately for each chan one creditor holds a particular claim, list the other art 2. | laim. For each claim listed, identify wh | at type of claim | it is. Do not list claim | ns already included in Pa | on Page of |
| 4.1 | Aes/suntrust | Last 4 digits of account number | er 0002 | | | \$65,390.00 |
| ··· | Nonpriority Creditor's Name Pob 61047 Harrisburg, PA 17106 | When was the debt incurred? | | 12/07 Last Ac | | ψ03,330.00 |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the clai | m is: Check all | that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecu | ıred claim: | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sereport as priority claims | eparation agree | ment or divorce that | you did not | |
| | ■ No | Debts to pension or profit-sha | aring plans, and | other similar debts | | |
| | ∏ ves | Other Specify | | | | |

Educational

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Case number (if know)

| DCDIO | Lucia B Cullilligham | Case number (il know) | |
|-------|--|---|----------------|
| 4.2 | Allied Cash Advance | Last 4 digits of account number | \$800.00 |
| | Nonpriority Creditor's Name 4802 Indianapolis East Chicago, IN 46312 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.3 | Allied Collection Services | Last 4 digits of account number 99N1 | \$64.00 |
| | Nonpriority Creditor's Name | | VO.1100 |
| | 8550 Balboa Blvd Suite 232 | When was the debt incurred? Opened 07/14 | |
| | Northridge, CA 91325 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Llc - Food | |
| 4.4 | Americash Loans, LLC | Last 4 digits of account number 8581 | \$2,138.71 |
| | Nonpriority Creditor's Name 880 Lee Street | When was the debt incurred? | |
| | Suite 302 | Then was the dest mounted: | |
| | Des Plaines, IL 60016 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ■ NO | = 1111 to position of promotioning plants, and outlood offinial double | |
| | 1 1 100 | Chan Danife | |

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Debtor 1 Lucia B Cunningham Case number (if know) 4.5 \$235.86 Ashro Last 4 digits of account number 9220 Nonpriority Creditor's Name 1112 7th Ave When was the debt incurred? Monroe, WI 53566-1364 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify **Brother Loan and Finance** \$0.00 4.6 Company Last 4 digits of account number Nonpriority Creditor's Name 7621 West 63rd Street When was the debt incurred? Summit Argo, IL 60501 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.7 **Capital One** Last 4 digits of account number 8045 \$375.00 Nonpriority Creditor's Name Opened 04/15 Last Active Attn: Bankruptcy Po Box 30285 When was the debt incurred? 6/10/16 Salt Lake City, UT 84130 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Credit Card ☐ Yes

Document Page 22 of 73 Debtor 1 Lucia B Cunningham Case number (if know) 4.8 \$271.00 Comenity Bank/Ashley Stewart Last 4 digits of account number 5662 Nonpriority Creditor's Name Opened 02/15 Last Active Po Box 182125 When was the debt incurred? 9/09/16 Columbus, OH 43218-2125 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.9 Comenity Capital Bank, Last 4 digits of account number 7261 \$608.13 Nonpriority Creditor's Name PO Box 183043 When was the debt incurred? Attn:: Bankruptcy Dept Columbus, OH 43218-3043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.1 Commonwealth Financial Systems 57N1 \$290.00 Last 4 digits of account number Nonpriority Creditor's Name 245 Main St When was the debt incurred? **Opened 10/14** Dickson City, PA 18519 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Collection Attorney Mea-Sullivan

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Debtor 1 Lucia B Cunningham Case number (if know) 4.1 Creditbox.com \$0.00 Last 4 digits of account number Nonpriority Creditor's Name PO box 168 When was the debt incurred? Des Plaines, IL 60016 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.1 **Dell Financial Services** 2786 \$3,743.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 7/14/15 Last Active Attn: Bankruptcy When was the debt incurred? Po Box 81577 12/16/16 Austin, TX 78708 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.1 **EdFinancial Services, LIc** 8149 \$17,789.00 3 Last 4 digits of account number Nonpriority Creditor's Name Opened 01/16 Last Active 298 North Seven Oaks Dr When was the debt incurred? 12/31/16 Knoxville, TN 37922 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No

T Yes

Educational

Other. Specify

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Case number (if know)

| DCDI | Lucia B Cullilligham | | Case Harriber (II know) | |
|----------|---|---|---|------------|
| 4.1 4 | EdFinancial Services, Llc | Last 4 digits of account number | 1749 | \$5,161.00 |
| | Nonpriority Creditor's Name 298 North Seven Oaks Dr Knoxville, TN 37922 | When was the debt incurred? | Opened 11/16 Last Active 12/31/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another | ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No ☐ Yes | ■ Student loans □ Obligations arising out of a separeport as priority claims □ Debts to pension or profit-sharin □ Other. Specify | aration agreement or divorce that you did not | |
| | 55 | Educationa | al | |
| 4.1 5 | First Premier Bank | Last 4 digits of account number | 4012 | \$931.00 |
| | Nonpriority Creditor's Name 601 S Minneaplois Ave Dious FDalls, SD 57104 | When was the debt incurred? | Opened 10/15 Last Active 6/11/16 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | 1 | |
| 4.1 6 | Gettington Nonpriority Creditor's Name | Last 4 digits of account number | 8517 | \$584.51 |
| | 6250 Ridgewood Road Saint Cloud, MN 56303 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? ■ No | □ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| | ■ No | <u> </u> | יש אימוים, מווע טנוופו סוווווומו עבטנס | |
| | LIYES | Other Specific | | |

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Nonpriority Creditor's Name

100 West Randolph Street
Chicago, IL 60601

Number Street City State Zlp Code
Who incurred the debt? Check one.

Debtor 1 only
Debtor 2 only
Debtor 1 and Debtor 2 only
At least one of the debtors and another
Check if this claim is for a community debt
stee claim subject to offset?

No
Debtor 1 onfset
Contingent
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Disputed
Type of NONPRIORITY unsecured claim:
Debtor 1 only
Debtor 2 only
Debtor 3 only
Debtor 4 only
Debtor 4 only
Debtor 5 only
Debtor 6 only
Debtor 6 only
Debtor 6 only
Debtor 7 only
Debtor 7 only
Debtor 8 only
Debtor 9 only
Debtor

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Debtor 1 Lucia B Cunningham Case number (if know) 4.2 K. Jordan 07B2 \$497.73 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 2809 When was the debt incurred? Monroe, WI 53566-8009 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Masseys 07A2 \$543.18 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 2822 Monroe, WI 53566-8022 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.2 Medical Recovery Speci 3251 \$250.00 Last 4 digits of account number Nonpriority Creditor's Name 2250 E Devon Ave Ste 352 When was the debt incurred? **Opened 09/16** Des Plaines, IL 60018 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No **Collection Attorney Ingalls Memorial**

☐ Yes

■ Other. Specify Hospital

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Case number (if know)

| 4.2 | Midland Credit Management, Inc. | Last 4 digits of account number 1393 | \$14,272.37 |
|----------|--|---|-------------|
| | Nonpriority Creditor's Name 2365 Northside Drive | When was the debt incurred? | |
| | Suite 300 | When was the dept incurred? | |
| | San Diego, CA 92108 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify | |
| 4.2 | | | |
| 4 | Monroe & Main | Last 4 digits of account number | \$409.42 |
| | Nonpriority Creditor's Name 1112 7th Avenue | When was the debt incurred? | |
| | Monroe, WI 53566-1364 | When was the dept incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | _ | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify | |
| | | | |
| 4.2 5 | Montgomery Ward | Last 4 digits of account number 9290 | \$656.31 |
| | Nonpriority Creditor's Name | | |
| | 1112 7th Ave | When was the debt incurred? | |
| | Monroe, WI 53566-1364 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | ☐ Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | | ☐ Student loans | |
| | ☐ Check if this claim is for a community debt | Dobligations arising out of a separation agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify | |
| | | | |

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Debtor 1 Lucia B Cunningham Case number (if know) 4.2 **North Cash** 8700 \$655.23 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 498 When was the debt incurred? Hays, MT 59527 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 **Opportunity Financial** 6796 \$4,144.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11 E Adams Street, Suite 501 Chicago, IL 60603 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.2 Payday Loan Store of IL \$13,000.00 Last 4 digits of account number 8 Nonpriority Creditor's Name c/o Daniel L Wolfberg When was the debt incurred? One S Wacker Drive, 36th Floor Chicago, IL 60606 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

Other. Specify

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Debtor 1 Lucia B Cunningham Case number (if know) 4.2 \$608.13 **Paypal Credit** 7261 Last 4 digits of account number 9 Nonpriority Creditor's Name PO box 5138 When was the debt incurred? Timonium, MD 21094 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Sovereign Advance 6439 \$837.50 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 10 When was the debt incurred? Parshall, ND 58770 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Stoneberry 07C2 \$202.87 Last 4 digits of account number Nonpriority Creditor's Name PO Box 2820 When was the debt incurred? Monroe, WI 53566-8020 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify

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Case number (if know) Debtor 1 Lucia B Cunningham 4.3 Synchrony Bank/ Old Navy 4999 \$421.00 Last 4 digits of account number 2 Nonpriority Creditor's Name Opened 10/15 Last Active Po Box 965060 When was the debt incurred? 6/12/16 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes 4.3 Synchrony Bank/Amazon 8636 \$929.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 07/15 Last Active Po Box 965060 When was the debt incurred? 6/12/16 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Charge Account 4.3 Synchrony Bank/Walmart 0837 \$1,576.00 Last 4 digits of account number Nonpriority Creditor's Name Opened 05/15 Last Active Po Box 965060 When was the debt incurred? 8/10/16 Orlando, FL 32896-5060 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Charge Account ☐ Yes

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Debtor 1 Lucia B Cunningham Case number (if know) 4.3 \$746.95 Target Cash/True Accord 0979 Last 4 digits of account number 5 Nonpriority Creditor's Name 153 Maiden Lane, 3rd Floor When was the debt incurred? San Francisco, CA 94108 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 **Union Plus Credit Card** 8045 \$375.72 Last 4 digits of account number 6 Nonpriority Creditor's Name PO Box 30255 When was the debt incurred? Salt Lake City, UT 84130-0255 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify 4.3 Verizon 0001 \$1.904.00 Last 4 digits of account number Nonpriority Creditor's Name 500 Technology Dr Opened 03/12 Last Active Suite 500 When was the debt incurred? 12/31/15 Weldon Spring, MO 63304 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes

Other. Specify

Page 32 of 73 Document Case number (if know) Debtor 1 Lucia B Cunningham 4.3 Zalutsky & Pinski, Ltd \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name 111 West Washington When was the debt incurred? **Suite 1550** Chicago, IL 60602 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify 4.3 Zingo Cash 6446 \$863.00 Last 4 digits of account number 9 Nonpriority Creditor's Name Opened 4/01/16 Last Active Po Box 5601 When was the debt incurred? 11/25/16 Vernon Hills, IL 60061 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Unsecured Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **ALAN Slodki** Line 4.38 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8818 KILDARE AVE ■ Part 2: Creditors with Nonpriority Unsecured Claims SKOKIE IL 60076 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Allied Cash Advance** Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 7755 Montgomery Road Part 2: Creditors with Nonpriority Unsecured Claims Suite 400 Cincinnati, OH 45236 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Allied Collection Services** Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 8550 Balboa Blvd Ste 232 ■ Part 2: Creditors with Nonpriority Unsecured Claims

Northridge, CA 91325

Official Form 106 E/F

Last 4 digits of account number

Name and Address

American Coradius International

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.9 of (Check one):

Case 17-02032 Doc 1 Filed 01/24/17 Entered 01/24/17 13:02:48 Desc Main Document Page 33 of 73 Case number (if know) Debtor 1 Lucia B Cunningham LLC ☐ Part 1: Creditors with Priority Unsecured Claims 2420 Sweet Home Road Part 2: Creditors with Nonpriority Unsecured Claims Suite 150 Amherst, NY 14228-2244 Last 4 digits of account number 9617 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Capital One** ☐ Part 1: Creditors with Priority Unsecured Claims Line 4.7 of (Check one): Po Box 30253 ■ Part 2: Creditors with Nonpriority Unsecured Claims Salt Lake City, UT 84130 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Creditbox.com Line 4.4 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO box 168 Part 2: Creditors with Nonpriority Unsecured Claims Des Plaines, IL 60016 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Dell Financial Services** Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1 Dell Way ■ Part 2: Creditors with Nonpriority Unsecured Claims Round Rock, TX 78682 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **EdFinancial Services, Llc** Line 4.13 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 120 N Seven Oaks Dr Part 2: Creditors with Nonpriority Unsecured Claims Knoxville, TN 37922 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **EdFinancial Services, LIc** Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 120 N Seven Oaks Dr Part 2: Creditors with Nonpriority Unsecured Claims Knoxville, TN 37922 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? EGS Financial Care. Inc. Line 4.34 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 4740 Baxter Road Part 2: Creditors with Nonpriority Unsecured Claims Virginia Beach, VA 23462 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address First Premier Bank Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 601 S Minnesota Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims Sioux Falls, SD 57104 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Gary A. Smiley Line **4.6** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **4741 N WESTERN AVE** ■ Part 2: Creditors with Nonpriority Unsecured Claims CHICAGO IL 60625 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Golden Valley Lending Line 4.17 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1888 Mission Street ■ Part 2: Creditors with Nonpriority Unsecured Claims San Francisco, CA 94103 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **HELLER FRISONE LTD** Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **33 N LASALLE 1200** ■ Part 2: Creditors with Nonpriority Unsecured Claims CHICAGO IL 60602 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Ingalls Memorial Hospital** Line 4.22 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims

Official Form 106 E/F

15620 S Wood Street

Patient Financial Services Dept.

Part 2: Creditors with Nonpriority Unsecured Claims

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Case number (if know)

| DCDIOI I | ucia b c | ummynam | | Case ne | arriber (ii know) | | |
|---|-------------|----------------------------------|--|---|--|--------------------|--|
| Harvey, IL | 60426 | | Last 4 digits of account number | | | | |
| Name and Address Midland Funding LLC c/o MCM 2365 Northside Drive Suite 300 | | | On which entry in Part 1 or Part 2 did Line 4.23 of (Check one): | ☐ Part 1: C | iginal creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Cla | ims | |
| San Diego, CA 92108 | | | Last 4 digits of account number | | | | |
| Name and Address Professional Recovery Consultants PO Box 51187 | | very Consultants | On which entry in Part 1 or Part 2 did Line 4.31 of (Check one): | ☐ Part 1: C | reditors with Priority Unsecured Claims | | |
| Durham, NC 27717-1187 | | | Last 4 digits of account number | ■ Part 2: C | reditors with Nonpriority Unsecured Cla | ims | |
| Name and Ad | dress | | On which entry in Part 1 or Part 2 did | | | | |
| Professional Recovery Consultants PO Box 51187 | | | Line <u>4.20</u> of (<i>Check one</i>): | eck one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| Durham, NC 27717-1187 | | | Last 4 digits of account number | 82 | | | |
| Name and Address Synchrony Bank/ Old Navy Po Box 965005 Orlando, FL 32896 | | | On which entry in Part 1 or Part 2 did Line 4.32 of (Check one): | id you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | |
| | | | Last 4 digits of account number | | | | |
| Name and Address Synchrony Bank/Amazon Po Box 965015 Orlando, FL 32896 | | | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.33 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | | Last 4 digits of account number | | | | |
| Name and Address Target Finance, LLC PO Box 581 | | | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.35 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| Hays, MT 59527 | | | Last 4 digits of account number | | | | |
| Name and Address Verizon Po Box 49 Lakeland, FL 33802 | | | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.37 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | | Last 4 digits of account number | | | | |
| Name and Address Zingo Cash Illinois LLC 200 N Fairway Dr #180 | | | On which entry in Part 1 or Part 2 did you list the original creditor? Line 4.39 of (Check one): Part 1: Creditors with Priority Unsecured Claims | | | | |
| Vernon Hills, IL 60061 | | | Last 4 digits of account number | ■ Part 2: Creditors with Nonpriority Unsecured Claims per | | | |
| Don't do | -l -l 4l A | waynta fan Faab Tyma af | Una carred Claire | | | | |
| | mounts of o | | Unsecured Claim | al reporting p | ourposes only. 28 U.S.C. §159. Add th | e amounts for each | |
| | 60 | Democtic compart chlistatic | | 60 | Total Claim | | |
| Total claims | 6a. | Domestic support obligation | ภเจ | 6a. | \$ | | |
| from Part 1 | 6b. 6c. | | bts you owe the government al injury while you were intoxicated | 6b. 6c. | \$ <u>30,000.00</u> \$ 0.00 | | |
| | 6d. | Other. Add all other priority to | unsecured claims. Write that amount here | e. 6d. | \$ 0.00 | _ | |
| | 6e. | Total Priority. Add lines 6a t | hrough 6d. | 6e. | \$ 30,000.00 | | |

Official Form 106 E/F

Student loans

Total Claim

88,340.00

6f.

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Debtor 1 Lucia B Cunningham

| Total claims | | | | |
|--------------|-------------------|--|-------------------|------------------|
| from Part 2 | 6g. 6h. 6i. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Add all other nonpriority unsecured claims. Write that amount here. | 6g. 6h. 6i. | \$ 0.00 |
| | | | | \$ 0.00 |
| | | | | \$ 54,798.62 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 143,138.62 |

Official Form 106 E/F

| | | I AUGUITIC | | |
|---|--------------------------|-------------------|-------------|--|
| Fill in this infor | rmation to identify your | case: | | |
| Debtor 1 | Lucia B Cunning | ham | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | company with | n whom you have the c | contract or lease | State what the contract or lease is for |
|-----|-----------|--------------|-----------------------|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.2 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.4 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.5 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| | -, | | | | |

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| | | Docume | ent Page 37 d | OT 7.3 | |
|-------------------------------|--|---|---|---|---|
| Fill in this | information to identify your | | | | |
| Debtor 1 | Lucia B Cunning | ham | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filir | ng) First Name | Middle Name | Last Name | | |
| United Sta | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case numb | hor | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| Official | l Form 106H | | | | |
| Sched | lule H: Your Cod | ebtors | | | 12/15 |
| people are fill it out, a | filing together, both are equ | ally responsible for supposes on the left. Attack | olying correct informat in the Additional Page t | tion. If more space is n | ate as possible. If two married needed, copy the Additional Page, o of any Additional Pages, write |
| 1. Do | you have any codebtors? (If | you are filing a joint case, | do not list either spouse | as a codebtor. | |
| ■ No □ Yes | } | | | | |
| | hin the last 8 years, have you a, California, Idaho, Louisiana | | | | |
| | Go to line 3. Did your spouse, former spouse, | use, or legal equivalent live | e with you at the time? | | |
| in line Form | 2 again as a codebtor only i | f that person is a guaran | tor or cosigner. Make | sure you have listed th | g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 | | | | ☐ Schedule D. lin | е |
| | Name | | | ☐ Schedule E/F, I | ine |
| | | | | ☐ Schedule G, lin | e |
| | Number Street City | State | ZIP Code | _ | |
| | | | | Cabadula D lia | _ |
| 3.2 | Name | | | □ Schedule D, lin □ Schedule E/F, I | |
| | | | | ☐ Schedule G, lin | |
| - | Number Street | | | _ | |
| | City | State | ZIP Code | | |

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| Fill | in this information to | identify your ca | ase: | | | | | | | | |
|--------------------|---|------------------------------|---|--|----------------------------|-----------------|---------------------|-----------------------|-----------------------|------------------------------------|-----------------------|
| Del | otor 1 | Lucia B Cun | ningham | | | _ | | | | | |
| | otor 2 ouse, if filing) | | | | | _ | | | | | |
| Uni | ted States Bankrupto | y Court for the | NORTHERN DISTRIC | T OF ILLINOIS | | | | | | | |
| | se number nown) | | | | | | □ A | | ed filing ent show | wing postpetiti e following dat | |
| 0 | fficial Form | <u> 1061</u> | | | | | M | M / DD/ Y | YYY | | |
| S | chedule I: Y | our Inco | ome | | | | | | | | 12/15 |
| sup spo atta | plying correct informuse. If you are sepatch a separate sheet | mation. If you rated and you | sible. If two married peo are married and not filin r spouse is not filing wi On the top of any addition | ng jointly, and you th you, do not inc | r spouse i: lude inforn | s livi natio | ng with on about | you, incl your spo | ude infouse. If | ormation abo more space i | ut your is needed, |
| 1. | Fill in your employ information. | yment | | Debtor 1 | | | | Debtor 2 | or noi | n-filing spous | e |
| | If you have more than one job, attach a separate page with information about additional | Employment status | ■ Employed | | | | ☐ Emple | oyed | | | |
| | | Employment status | ☐ Not employed | | | | □ Not e | mploye | d | | |
| | employers. | | Occupation | Administrative | Assista: | nt | | | | | |
| | Include part-time, s self-employed work | | Employer's name | State of Illinoi | s - | | | | | | |
| | Occupation may incor homemaker, if it | | Employer's address | Office of the C 325 West Ada Springfield, IL | ms [·] | er | | | | | |
| | | | How long employed the | nere? 21 year | ars | | | _ | | | |
| Par | rt 2: Give Deta | ils About Mon | thly Income | | | | | | | | |
| spoo If yo | mate monthly inconuse unless you are se | ne as of the date | ate you file this form. If you | | • | Í | , | that perso | on on th | , | o o |
| | | | | | | | . Or Dec | | | -filing spouse | |
| 2. | | | ry, and commissions (be calculate what the monthl | | 2. | \$ | 5, | 067.00 | \$ | N/A | <u>A</u> |
| 3. | Estimate and list r | monthly overti | me pay. | | 3. | +\$ | | 0.00 | +\$ | N/A | <u>A</u> |
| 4. | Calculate gross In | come. Add lir | ne 2 + line 3. | | 4. | \$ | 5,06 | 67.00 | \$ | N/A | |

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| Deb | tor 1 | Lucia B Cunningham | - | Cas | se number (if known) | | | |
|-----|--------------------------|--|--------|---------|----------------------|------|----------------------|----------|
| | | | | F | or Debtor 1 | | ebtor 2 or | |
| | Copy | y line 4 here | 4. | \$ | 5,067.00 | \$ | N/A | _ |
| 5. | List | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 816.56 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | | 202.68 | \$ | N/A | _ |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | _ |
| | 5e. | Insurance | 5e. | \$ | 494.48 | \$ | N/A | _ |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | _ |
| | 5g. | Union dues | 5g. | \$ | 73.78 | \$ | N/A | _ |
| | 5h. | Other deductions. Specify: cms transit | 5h | + \$ | 210.00 | + \$ | N/A | = |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 1,797.50 | \$ | N/A | _ |
| 7. | Calc | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 3,269.50 | \$ | N/A | _ |
| 8. | List a 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | |
| | 8d. | Unemployment compensation | 8d. | | 0.00 | \$ | N/A | _ |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | _ |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | N/A | _ |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | _ |
| | 8h. | Other monthly income. Specify: | 8h | + \$ | 0.00 | + \$ | N/A | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 0.00 | \$ | N/A | 4 |
| 10 | Calc | ulate monthly income. Add line 7 + line 9. | 10. \$ | : | 3,269.50 + \$ | | N/A = \$ | 3,269.50 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | <i></i> | 3,209.30 · · · | | | 3,209.30 |
| 11. | State Inclu- other | e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your riends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not a second contribution. | deper | | • | | hedule J. 11. +\$ | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines | | | | | 12. \$ | 3,269.50 |
| 13. | Do y ■ | ou expect an increase or decrease within the year after you file this form No. | ? | | | | | y income |
| | _ | Van Frimlain. | | | | | | 1 |

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| Filli | in this information to identify your case: | | 1 | | |
|-------------|--|--|-----------------|---|---|
| Debt | otor 1 Lucia B Cunningham | | Chec | ck if this is: | |
| | otor 2 ouse, if filing) | | | An amended filing A supplement show 13 expenses as of | wing postpetition chapter the following date: |
| `` | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN | NOIS | - | MM / DD / YYYY | |
| | | <u> </u> | | WIWI / DD / TTTT | |
| | nown) | | | | |
| Of | fficial Form 106J | | | | |
| | chedule J: Your Expenses | | | | 12/1 |
| info | as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this nber (if known). Answer every question. | | | | |
| Part | t 1: Describe Your Household Is this a joint case? | | | | |
| •• | ■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, Expense | s for Separate House | ehold of Deb | tor 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | □ Yes □ No |
| | | | | | ☐ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| | | | | | □ No □ Yes |
| 3. | Do your expenses include ■ No | | | | — 103 |
| | expenses of people other than yourself and your dependents? | | | | |
| Esti exp | t 2: Estimate Your Ongoing Monthly Expenses imate your expenses as of your bankruptcy filing date unless benses as of a date after the bankruptcy is filed. If this is a supplicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> ficial Form 106l.) | | | Your exp | enses |
| 4. | The rental or home ownership expenses for your residence. payments and any rent for the ground or lot. | Include first mortgag | e 4. \$ | 3 | 0.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | | 4a. \$ | } | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | | 4b. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | 4c. \$ | | 0.00 |
| 5 | 4d. Homeowner's association or condominium dues | ama aquitu lacas | 4d. \$ 5. \$ | | 0.00 |
| 5. | Additional mortgage payments for your residence, such as he | Jine equity loans | ວ. ປ |) | V.UU |

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| Deptor 1 Lucia B | Cunningham | Case num | ber (if known) | |
|------------------------------------|---|------------------|------------------|-----------------------------|
| 6. Utilities: | | | | |
| | , heat, natural gas | 6a. | \$ | 300.00 |
| | wer, garbage collection | 6b. | | 100.00 |
| • | e, cell phone, Internet, satellite, and cable services | 6c. | | 315.00 |
| 6d. Other. Sp | | 6d. | · | 0.00 |
| • | ekeeping supplies | 7. | | 650.00 |
| | children's education costs | 8. | \$ | 0.00 |
| | lry, and dry cleaning | | \$ | 140.00 |
| | oroducts and services | 9. 10. | | |
| 1. Medical and de | | 11. | | 100.00 |
| | • | 11. | Φ | 60.00 |
| 2. Transportation Do not include c | . Include gas, maintenance, bus or train fare. | 12. | \$ | 300.00 |
| | clubs, recreation, newspapers, magazines, and books | 13. | · | 50.00 |
| | tributions and religious donations | 14. | | 25.00 |
| 5. Insurance. | indutions and religious donations | 14. | Ψ | 23.00 |
| | nsurance deducted from your pay or included in lines 4 or 20. | | | |
| 15a. Life insura | | 15a. | \$ | 223.98 |
| 15b. Health ins | | 15b. | | 0.00 |
| 15c. Vehicle in | | 15c. | · | 0.00 |
| 15d. Other insu | | 15d. | · | 0.00 |
| | nclude taxes deducted from your pay or included in lines 4 or 20. | | Ψ | 0.00 |
| Specify: | icidae taxes deducted from your pay or included in lines 4 or 20. | 16. | \$ | 0.00 |
| 7. Installment or I | ease navments: | | Ψ | 0.00 |
| | ease payments. ents for Vehicle 1 | 17a. | \$ | 0.00 |
| | ents for Vehicle 2 | 17b. | · | 0.00 |
| 17c. Other. Sp | | 17c. | · | 0.00 |
| 17d. Other. Sp | | 176. 17d. | · | |
| | ecity. s of alimony, maintenance, and support that you did not repo | | Φ | 0.00 |
| | your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 1 | | \$ | 0.00 |
| | s you make to support others who do not live with you. | 001). | \$ | 0.00 |
| Specify: | э уол шано на саррон санона пно до нестио ини усл | 19. | <u> </u> | 0.00 |
| | perty expenses not included in lines 4 or 5 of this form or on | | our Income | |
| | s on other property | 20a. | | 0.00 |
| 20b. Real estat | | 20b. | | 0.00 |
| | homeowner's, or renter's insurance | 20c. | | 0.00 |
| | nce, repair, and upkeep expenses | 20d. | | 0.00 |
| | ner's association or condominium dues | 20d. 20e. | · | |
| | ier's association of condominium dues | | · | 0.00 |
| 1. Other: Specify: | | 21. | +\$ | 0.00 |
| 2. Calculate your | monthly expenses | | | |
| 22a. Add lines 4 | | | \$ | 2,263.98 |
| | 22 (monthly expenses for Debtor 2), if any, from Official Form 106 | SJ-2 | \$ | |
| | a and 22b. The result is your monthly expenses. | · - - | \$ | 2 262 00 |
| 220. AUU IIIIE 22 | a and 220. The result is your monthly expenses. | | Ψ | 2,263.98 |
| 3. Calculate your | monthly net income. | | | |
| 23a. Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 3,269.50 |
| | r monthly expenses from line 22c above. | 23b. | | 2,263.98 |
| 177 | - , | | | _, |
| 23c. Subtract v | your monthly expenses from your monthly income. | | | |
| | t is your monthly net income. | 23c. | \$ | 1,005.52 |
| | • | | - | |
| | an increase or decrease in your expenses within the year af | | | |
| | ou expect to finish paying for your car loan within the year or do you expect | ct your mortgage | payment to incre | ease or decrease because of |
| _ | terms of your mortgage? | | | |
| No. | | | | |
| П Уес | Explain here: | | | - |

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| Fill in this infor | mation to identify your | case: | | | |
|-------------------------------------|--|--------------------------|--------------------------|-------------------------|--|
| Debtor 1 | Lucia B Cunningl | nam | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number (if known) | | | | | ☐ Check if this is an amended filing |
| Official For | m 106Dec | | | | |
| Declarat | tion About a | n Individual | Debtor's Se | chedules | 12/15 |
| obtaining mone years, or both. 1 | | n connection with a bank | | | ement, concealing property, or 00, or imprisonment for up to 20 |
| Did you pa | ay or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | | nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules fi | led with this declarati | on and |
| X /s/ Luc | cia B Cunningham | | X | | |
| Lucia | B Cunningham | | Signature of | of Debtor 2 | |

Date _____

Date **January 24, 2017**

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| Fill | in this inform | nation to identify you | r c350. | | | |
|----------------|--------------------------------|---|---|---|--|---|
| | | | | | | |
| Den | tor 1 | Lucia B Cunning | Middle Name | Last Name | | |
| | tor 2 use if, filing) | First Name | Middle Name | Last Name | | |
| | | | NORTHERN DISTRICT (| | | |
| Unit | eu States bar | kruptcy Court for the: | NORTHERN DISTRICT | DF ILLINOIS | | |
| Cas (if kno | e number own) | | | | _ | Check if this is an mended filing |
| | icial For | | Affairs for Indivi | duals Filing for B | Bankruptcy | 4/16 |
| infor num | mation. If me ber (if known | ore space is needed,). Answer every que | attach a separate sheet to stion. | this form. On the top of an | equally responsible for sup y additional pages, write you | |
| Pari | Give D | etails About Your Ma | rital Status and Where You | Lived Before | | |
| 1. | What is your | current marital statu | ıs? | | | |
| | ■ Married □ Not mar | ried | | | | |
| 2. | During the la | st 3 years, have you | lived anywhere other than | where you live now? | | |
| | ■ No □ Yes. List | all of the places you l | ived in the last 3 years. Do no | ot include where you live nov | ν. | |
| | Debtor 1 Pri | or Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ac | ldress: | Dates Debtor 2 lived there |
| | | | | | nity property state or territory ico, Texas, Washington and V | |
| | ■ No | | | | | |
| | ☐ Yes. Ma | ke sure you fill out <i>Scl</i> | nedule H: Your Codebtors (O | fficial Form 106H). | | |
| Pari | 2 Explain | n the Sources of You | r Income | | | |
| | Fill in the tota | I amount of income yo | nployment or from operatin u received from all jobs and a have income that you receiv | all businesses, including part | | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) |
| | | of current year until d for bankruptcy: | ■ Wages, commissions, bonuses, tips | \$2,533.50 | ☐ Wages, commissions, bonuses, tips | |
| | | | ☐ Operating a business | | ☐ Operating a business | |

Official Form 107

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| | | | | Debtor 1 | | Debtor 2 | | |
|----|---------------------------|---------------------------|---|---|---|---------------------------------------|---------------------------|---|
| | | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of inco | | Gross income (before deductions and exclusions) |
| | | lendar yea to Decemi | r: ber 31, 2016) | ■ Wages, commissions, bonuses, tips | \$60,804.00 | ☐ Wages, combonuses, tips | missions, | |
| | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | |
| | | | before that: ber 31, 2015) | ■ Wages, commissions, bonuses, tips | \$51,138.00 | ☐ Wages, comi | missions, | |
| | | | | ☐ Operating a business | | ☐ Operating a b | ousiness | |
| | and oth winning List each | er public bigs. If you ar | enefit payments e filing a joint ca nd the gross inc | ther that income is taxable. Exa ; pensions; rental income; inter ise and you have income that y come from each source separat | est; dividends; money collec you received together, list it o | ted from lawsuits; inly once under De | royalties; and btor 1. | ecurity, unemployment, d gambling and lottery |
| | | | | Debtor 1 | | Debtor 2 | | |
| | | | | Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Sources of inco Describe below. | | Gross income (before deductions and exclusions) |
| Pa | rt 3: L | ist Certair | n Payments You | u Made Before You Filed for I | Bankruptcy | | | |
| 6. | Are eitl □ No | During | r Debtor 1 nor ual primarily for the 90 days before. Go to line | 2's debts primarily consumer Debtor 2 has primarily consumer a personal, family, or household fore you filed for bankruptcy, die 7. | imer debts. Consumer debts d purpose." | | | 1(8) as "incurred by an |
| | | □ _{Ye} * Subj | paid that c | each creditor to whom you pai reditor. Do not include payment payments to an attorney for the nt on 4/01/19 and every 3 years | its for domestic support oblig nis bankruptcy case. | ations, such as chi | ild support a | and alimony. Also, do |
| | ■ Ye | | | or both have primarily consulore you filed for bankruptcy, di | | I of \$600 or more? | | |
| | | ■ No | o. Go to line | 7. | | | | |
| | | □ Y€ | include pa | each creditor to whom you pai yments for domestic support ol or this bankruptcy case. | | | | |
| | Credit | or's Name | and Address | Dates of payme | nt Total amount | Amount you | Was this p | payment for |

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Case number (if known) Document Debtor 1 Lucia B Cunningham

| 7. | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. | | | | | | | | |
|-----|---|------------------------------|------------------------|----------------------|--------------------|----------------------|--|--|--|
| | ■ No | | | | | | | | |
| | ☐ Yes. List all payments to an insider. | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment | | | |
| В. | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cost | | ments or transfer a | any property on a | ccount of a de | bt that benefited an | | | |
| | ■ No | | | | | | | | |
| | Yes. List all payments to an insider | | | | | | | | |
| | Insider's Name and Address | Dates of payment | Total amount | Amount you | | this payment | | | |
| | | | paid | still owe | Include credi | tor's name | | | |
| Par | rt 4: Identify Legal Actions, Repossession | ns, and Foreclosures | | | | | | | |
| | List all such matters, including personal injury modifications, and contract disputes. No Yes. Fill in the details. | cases, small claims action | s, divorces, collectic | n suits, paternity a | ctions, support | or custody | | | |
| | Case title Case number | Nature of the case | Court or agency | | Status of the | e case | | | |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, f | oreclosed, garnis | hed, attached | , seized, or levied? | | | |
| | Creditor Name and Address | Describe the Property | | Date | | Value of the | | | |
| | | Explain what happened | d | | | property | | | |
| 11. | Within 90 days before you filed for bankrul accounts or refuse to make a payment bec ■ No □ Yes. Fill in the details. | | luding a bank or fii | nancial institution | , set off any a | mounts from your | | | |
| | Creditor Name and Address | Describe the action the | e creditor took | Date taken | action was | Amount | | | |
| 12. | Within 1 year before you filed for bankrupt court-appointed receiver, a custodian, or a ■ No □ Yes | | erty in the possess | ion of an assigne | e for the bene | fit of creditors, a | | | |
| Par | rt 5: List Certain Gifts and Contributions | | | | | | | | |
| 13. | Within 2 years before you filed for bankrup | otcy, did you give any gift | s with a total value | of more than \$60 | 0 per person? | | | | |
| | Yes. Fill in the details for each gift. | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | | Dates the g | s you gave ifts | Value | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | | |

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| 14. | Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. | | | | | | | | | |
|-----|--|----------|--|-----------------------------------|--------------------------|--|--|--|--|--|
| | Gifts or contributions to charities that to more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | otal | Describe what you contributed | Dates you contributed | Value | | | | | |
| | New Birth Outreach Ministries 2025 E 175th St Lansing, IL | | approximately \$300 yearly for last several years | various | \$300.00 | | | | | |
| Pa | rt 6: List Certain Losses | | | | | | | | | |
| 15. | Within 1 year before you filed for bankrup or gambling? | otcy o | r since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | | |
| | how the loce ecourred | | ribe any insurance coverage for the loss e the amount that insurance has paid. List pending | Date of your loss | Value of property | | | | | |
| | | | ince claims on line 33 of Schedule A/B: Property. | | | | | | | |
| | □ No ■ Yes. Fill in the details. Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo Lorraine M. Greenberg 150 North Michigan Avenue Suite 800 Chicago, IL 60601 | ou | Description and value of any property transferred \$310 for court costs; \$4,000 to be requested to be paid for attorneys fees through plan | Date payment or transfer was made | Amount of payment | | | | | |
| | Igreenberg@greenberglaw.net CC Advising Inc. 703 Washington Ave Suite 200 Bay City, MI 48708 www.ccadvising.com | | mandatory prefiling credit counseling | 1/10/2017 | \$9.76 | | | | | |
| 17. | promised to help you deal with your cred Do not include any payment or transfer that ■ No □ Yes. Fill in the details. | litors o | sted on line 16. | | | | | | | |
| | Person Who Was Paid Address | | Description and value of any property transferred | Date payment or transfer was | Amount of payment | | | | | |

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Debtor 1 Lucia B Cunningham

| 8. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your b Include both outright transfers and transfers mainclude gifts and transfers that you have alread No | usiness or financial affa ade as security (such as t | nirs? he granting of a | | | | | | |
|-----|---|---|------------------------------------|------------|---|-----------------------------------|--|--|--|
| | Yes. Fill in the details. | | | | | | | | |
| | Person Who Received Transfer Address | Description and v property transferr | | payme | ibe any property or ents received or debts n exchange | Date transfer was made | | | |
| | Person's relationship to you | | | | | | | | |
| 9. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of trust Description and value of the property transferred | | | | | | | | |
| | | | | | | made | | | |
| Par | t 8: List of Certain Financial Accounts, Ins | struments, Safe Deposit | Boxes, and Sto | orage Unit | s | | | | |
| 00 | Within 4 year before you filed for bonkerinte | v ware any financial co | | .manta ha | ld in vers name, as fee ve | uur banafit alaaad | | | |
| 20. | Within 1 year before you filed for bankruptc sold, moved, or transferred? | y, were any financial ac | counts or instru | iments ne | id in your name, or for yo | our benefit, closed, | | | |
| | Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. | | | | | | | | |
| | No | | | | | | | | |
| | Yes. Fill in the details. | | _ | | | | | | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of accou instrument | int or | Date account was closed, sold, | Last balance before closing or | | | |
| | Code | | | | moved, or transferred | transfer | | | |
| 21. | Do you now have, or did you have within 1 y cash, or other valuables? | year before you filed for | bankruptcy, an | y safe dep | oosit box or other deposi | tory for securities, | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Financial Institution | | Who else had access to it? Descril | | | Do you still | | | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, State and ZIP Code) | treet, City, | | | have it? | | | |
| 22. | Have you stored property in a storage unit of | or place other than your | home within 1 | year befor | e you filed for bankruptc | y? | | | |
| | ■ No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of Storage Facility | Who else has or h | nad access | Describe | the contents | Do you still have it? | | | |
| | Address (Number, Street, City, State and ZIP Code) | Address (Number, State and ZIP Code) | treet, City, | | | nave it: | | | |
| Par | t 9: Identify Property You Hold or Control | for Someone Else | | | | | | | |
| | | | | | | | | | |
| 23. | Do you hold or control any property that so for someone. | meone else owns? Inclu | ide any propert | y you borr | owed from, are storing for | or, or hold in trust | | | |
| | No | | | | | | | | |
| | ☐ Yes. Fill in the details. | | | | | | | | |
| | Owner's Name | Where is the prop | erty? | Describe | the property | Value | | | |
| | Address (Number, Street, City, State and ZIP Code) | (Number, Street, City, S Code) | | | | | | | |
| Par | t 10: Give Details About Environmental Info | ormation | | | | | | | |
| or | the purpose of Part 10, the following definiti | ons apply: | | | | | | | |

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.

| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. | | | | | | | |
|-----|---|---|--|--------------------|--|--|--|--|
| Rep | Report all notices, releases, and proceedings that you know about, regardless of when they occurred. | | | | | | | |
| 24. | Has any governmental unit notified you that | you may be liable or potentially liable | under or in violation of an environme | ntal law? | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? | | | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice | | | | |
| 26. | Have you been a party in any judicial or adn | ninistrative proceeding under any envir | onmental law? Include settlements a | nd orders. | | | | |
| | NoYes. Fill in the details. | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | |
| Par | t 11: Give Details About Your Business or | · | | | | | | |
| 27. | Within 4 years before you filed for bankrupt | 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? | | | | | | |
| | ■ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time | | | | | | | |
| | ☐ A member of a limited liability comp | any (LLC) or limited liability partnership | p (LLP) | | | | | |
| | ☐ A partner in a partnership | | | | | | | |
| | ☐ An officer, director, or managing ex | ecutive of a corporation | | | | | | |
| | ☐ An owner of at least 5% of the voting | g or equity securities of a corporation | | | | | | |
| | ☐ No. None of the above applies. Go to F | Part 12. | | | | | | |
| | ■ Yes. Check all that apply above and fill | in the details below for each business. | | | | | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security n | umber or ITIN. | | | | |
| | | | Dates business existed | | | | | |
| | Unique Products 588 Escanaba Ave Calumet City, IL 60409 | distributor of make up products | EIN: xxx-xx-8948 From-To 2015 - present | | | | | |

Page 49 of 73 Case number (if known) Document Debtor 1 Lucia B Cunningham 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No ☐ Yes. Fill in the details below. **Date Issued** Name Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Lucia B Cunningham Signature of Debtor 2 Lucia B Cunningham Signature of Debtor 1 Date January 24, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$33.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: January 24, 2017

Signed:

Lucia B Cunningham

Lorraine M. Greenberg

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

Case 17-02032 Doc 1 Filed 01/24/17 Entered 01/24/17 13:02:48 Desc Main Document Page 60 of 73

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | e Lucia B Cunningham | | Case N | 0. | |
|--|---|---|---------------------|--|--|
| | | Debtor(s) | Chapte | r 13 | |
| | DISCLOSURE OF COMP | ENSATION OF ATTO | RNEY FOR 1 | DEBTOR(S) | |
| 1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and the compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: | | | | aid to me, for services rendered or to | |
| | For legal services, I have agreed to accept | | \$ | 4,000.00 | |
| | Prior to the filing of this statement I have receive | | | 0.00 | |
| | | | | 4,000.00 | |
| 2. | The source of the compensation paid to me was: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 3. | The source of compensation to be paid to me is: | | | | |
| | ■ Debtor □ Other (specify): | | | | |
| 4. | ■ I have not agreed to share the above-disclosed con | mpensation with any other person | unless they are m | embers and associates of my law firm. | |
| | ☐ I have agreed to share the above-disclosed compe copy of the agreement, together with a list of the i | | | | |
| 5. | In return for the above-disclosed fee, I have agreed to | render legal service for all aspec | ts of the bankrupto | y case, including: | |
| | a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods; Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding: and any other professional services provided for specifically in the Court Approved Model Retainer Agreement in effect at the time the case is filed. | | | | |
| 6. | By agreement with the debtor(s), the above-disclosed Any professional service not provided at the time case is filed. Any appeals | d for specifically in the Court | Approved Mod | | |
| | | CERTIFICATION | | | |
| | I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding. | | | | |
| _ J | January 24, 2017 | /s/ Lorraine M. G | | | |
| | Date | Lorraine M. Gree | | | |
| | | Signature of Attorna Lorraine M. Gree | | | |
| | | 150 N. Michigan | | | |
| | | Suite 800 | | | |
| | | Chicago, IL 6060 | | | |
| | | 312-588-3330 Fa | |) | |
| | | Igreenberg@greenberg@greenberg@greenberg | enbergiaw.net | | |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtor and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule, and explain how and when the attorney's fees and the trustee's fees are determined and paid.

- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.
- 6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce).
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor, in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3. If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
 - ■The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
 - (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:
 - (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
 - (c) The retainer is a flat fee for the services to be rendered during the Chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;

- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the Chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney*. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

[Remaining page intentionally left blank.]

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00.
- 2. In addition, the debtor will pay the filing fee required in the case and other expenses of \$310.00.
- 3. Before signing this agreement, the attorney has received, \$0.00 toward the flat fee, leaving a balance due of \$4,000.00; and \$33.00 for expenses, leaving a balance due for the filing fee of \$0.00.
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: January 24, 2017

Signed:

Lucia B Cunningham

Lorraine M. Greenberg

Attorney for the Debtor(s)

Debtor(s)

Do not sign this agreement if the amounts are blank.

Local Bankruptcy Form 23c

United States Bankruptcy Court Northern District of Illinois

| In re | Lucia B Cunningham | | Case No. | | | |
|-------|---|---|------------|--|--|--|
| | | Debtor(s) | Chapter 13 | | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | | |
| | Number of Creditors: | | | | | |
| | The above-named Debtor(s) hereby verifies that the list of creditors is true and correct to the best of my (our) knowledge. | | | | | |
| Date: | January 24, 2017 | /s/ Lucia B Cunningham Lucia B Cunningham Signature of Debtor | | | | |

Aes/suntrust Pob 61047 Harrisburg, PA 17106

ALAN Slodki 8818 KILDARE AVE SKOKIE IL 60076

Allied Cash Advance 4802 Indianapolis East Chicago, IN 46312

Allied Cash Advance 7755 Montgomery Road Suite 400 Cincinnati, OH 45236

Allied Collection Services 8550 Balboa Blvd Suite 232 Northridge, CA 91325

Allied Collection Services 8550 Balboa Blvd Ste 232 Northridge, CA 91325

American Coradius International LLC 2420 Sweet Home Road Suite 150 Amherst, NY 14228-2244

Americash Loans, LLC 880 Lee Street Suite 302 Des Plaines, IL 60016

Ashro 1112 7th Ave Monroe, WI 53566-1364

Brother Loan and Finance Company 7621 West 63rd Street Summit Argo, IL 60501

Capital One Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130

Capital One Po Box 30253 Salt Lake City, UT 84130

Comenity Bank/Ashley Stewart Po Box 182125 Columbus, OH 43218-2125

Comenity Capital Bank, PO Box 183043 Attn:: Bankruptcy Dept Columbus, OH 43218-3043

Commonwealth Financial Systems 245 Main St Dickson City, PA 18519

Creditbox.com PO box 168 Des Plaines, IL 60016

Dell Financial Services Attn: Bankruptcy Po Box 81577 Austin, TX 78708

Dell Financial Services 1 Dell Way Round Rock, TX 78682

EdFinancial Services, Llc 298 North Seven Oaks Dr Knoxville, TN 37922

EdFinancial Services, Llc 120 N Seven Oaks Dr Knoxville, TN 37922 EGS Financial Care, Inc. 4740 Baxter Road Virginia Beach, VA 23462

First Premier Bank 601 S Minneaplois Ave Dious FDalls, SD 57104

First Premier Bank 601 S Minnesota Ave Sioux Falls, SD 57104

Gary A. Smiley 4741 N WESTERN AVE CHICAGO IL 60625

Gettington 6250 Ridgewood Road Saint Cloud, MN 56303

Golden Valley Lending 1888 Mission Street San Francisco, CA 94103

Golden Valley Lending, Inc. 635 East Hwy 20 E Upper Lake, CA 95485

Great American Finance 205 West Wacker Drive, Ste. 322 Chicago, IL 60606

HELLER FRISONE LTD 33 N LASALLE 1200 CHICAGO IL 60602

Illinois Department of Revenue PO Box 64338 Chicago, IL 60664-0338

Illoinois Lending Corporation 100 West Randolph Street Chicago, IL 60601 Ingalls Memorial Hospital Patient Financial Services Dept. 15620 S Wood Street Harvey, IL 60426

Internal Revenue Service Central Insolvency Unit P.O. Box 7346 Philadelphia, PA 19101-7346

K. Jordan
PO Box 2809
Monroe, WI 53566-8009

Masseys PO Box 2822 Monroe, WI 53566-8022

Medical Recovery Speci 2250 E Devon Ave Ste 352 Des Plaines, IL 60018

Midland Credit Management, Inc. 2365 Northside Drive Suite 300 San Diego, CA 92108

Midland Funding LLC c/o MCM 2365 Northside Drive Suite 300 San Diego, CA 92108

Monroe & Main 1112 7th Avenue Monroe, WI 53566-1364

Montgomery Ward 1112 7th Ave Monroe, WI 53566-1364

North Cash PO Box 498 Hays, MT 59527 Opportunity Financial 11 E Adams Street, Suite 501 Chicago, IL 60603

Payday Loan Store of IL c/o Daniel L Wolfberg One S Wacker Drive, 36th Floor Chicago, IL 60606

Paypal Credit PO box 5138 Timonium, MD 21094

Professional Recovery Consultants PO Box 51187 Durham, NC 27717-1187

Sovereign Advance PO Box 10 Parshall, ND 58770

Stoneberry PO Box 2820 Monroe, WI 53566-8020

Synchrony Bank/ Old Navy Po Box 965060 Orlando, FL 32896-5060

Synchrony Bank/ Old Navy Po Box 965005 Orlando, FL 32896

Synchrony Bank/Amazon Po Box 965060 Orlando, FL 32896-5060

Synchrony Bank/Amazon Po Box 965015 Orlando, FL 32896

Synchrony Bank/Walmart Po Box 965060 Orlando, FL 32896-5060

Target Cash/True Accord 153 Maiden Lane, 3rd Floor San Francisco, CA 94108

Target Finance, LLC PO Box 581 Hays, MT 59527

Union Plus Credit Card PO Box 30255 Salt Lake City, UT 84130-0255

Verizon 500 Technology Dr Suite 500 Weldon Spring, MO 63304

Verizon Po Box 49 Lakeland, FL 33802

Zalutsky & Pinski, Ltd 111 West Washington Suite 1550 Chicago, IL 60602

Zingo Cash Po Box 5601 Vernon Hills, IL 60061

Zingo Cash Illinois LLC 200 N Fairway Dr #180 Vernon Hills, IL 60061